PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 OCT 19 2005 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/757.673 Filing Date TRANSMITTAL January 10, 2001 First Named Inventor **FORM** James M. Wilson et al Art Unit 1635 **Examiner Name** Whiteman, Brian A. (to be used for all correspondence after initial filing) Attorney Docket Number GNVPN.019B1USA Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC 1 Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund Express Abandonment Request CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Customer No. 00270 Incomplete Application Reply to Missing Parts Express Mail No. ER636323018US under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name HOWSON AND HOWSON Signature

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Cathy A. Kodroff

October 19, 2005

Printed name

Date

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| · /F Effect | Fifective on 12/08/2004 | | | Complete if Known | | | | | |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). TRADEE TRANSMITTAL For FY 2005 | | | | Application Number 09/757,673 | | | | | |
| | | | \L [| Filing Date | Jai | January 10, 2001 | | | |
| | | | | First Named Inv | entor Jai | James M. Wilson | | | |
| | | | | Examiner Name | wi | Whiteman, Brian A. | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | <u></u> | Art Unit | 16: | 1635 | | | |
| TOTAL AMOUNT OF PAY | (MENT (\$ | 3520.00 | | Attorney Docket | No. GN | IVPN.019B1US | iA | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | |
| Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 08-3040 Deposit Account Name: HOWSON AND HOWSON For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION | | | | | | | | | |
| BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | |
| | FILING | | | H FEES | EXAMIN | ATION FEES | | | |
| Application Type | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid (\$) | | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | | | |
| - Design | 200 | 100 | 100 | 50 | 130 | 65 | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | |
| 2 EXCESS CLAIM FE | FS | | | | | | Small Entity | | |

Fee (\$) Fee Description Fee (\$) 50 Each claim over 20 (including Reissues) 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Fee Paid (\$) Multiple Dependent Claims Extra Claims Fee (\$) - 20 or HP = 0 0 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee (\$) Fee Paid (\$) 8 - 3 or HP = _____5__x 200 1000 HP = highest number of independent claims paid for, if greater than 3.

APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) x 100 =4. OTHER FEE(S) Fees Paid (\$) 4 Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petiton for Extension of Time and Petition for Revival of application

2520.00

| SUBMITTED BY | | | | | | | |
|-------------------|------------------|--|------------------------|--|--|--|--|
| Signature | Cather a Hoder | Registration No. (Attorney/Agent) 33,980 | Telephone 215-540-9200 | | | | |
| Name (Print/Type) | Cathy A. Kodroff | | Date October 19, 2005 | | | | |

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